

*Lakeshire*  
M I S S O U R I

**OCCUPANCY PERMIT - TENANT INFORMATION**

Address: \_\_\_\_\_ Apt #: \_\_\_\_\_ Lakeshire, Mo 63123

PROPERTY OWNER INFORMATION	
Name:	_____
Address:	_____
	_____
Phone #:	_____
Email:	_____

PROPERTY MANAGEMENT INFORMATION	
Name:	_____
Address:	_____
	_____
Phone #:	_____
Email:	_____

**INFORMATION ON PRIMARY TENANT AND ALL OTHER TENANTS**

Full Name (Primary Tenant)	Sex	Date of Birth	Relationship	Drivers License # / State	Phone #

Full Name	Sex	Date of Birth	Relationship	Drivers License # / State	Phone #

Full Name	Sex	Date of Birth	Relationship	Drivers License # / State	Phone #

Full Name	Sex	Date of Birth	Relationship	Drivers License # / State	Phone #

Full Name	Sex	Date of Birth	Relationship	Drivers License # / State	Phone #

Emergency Point of Contact Full Name:	_____	Phone #	_____
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